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## APPLICANTS

Lizhang Yang, Austin, TX;  
 Sergio D. Carranza, Cedar Park, TX;  
 Michael A. Jessup, Dripping Springs, TX;

\*\* CONTINUING DATA \*\*\*\*\*

None, TL

\*\* FOREIGN APPLICATIONS \*\*\*\*\*

None, TL

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 01/16/2004

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	<b>STATE OR COUNTRY</b> TX	<b>SHEETS DRAWING</b> 5	<b>TOTAL CLAIMS</b> 15	<b>INDEPENDENT CLAIMS</b> 1
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged Examiner's Signature: <u>TL</u> Initials: <u>TL</u>				

## ADDRESS

32692

## TITLE

Optical interconnect device

<b>FILING FEE RECEIVED</b> 770	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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